

**Fill in this information to identify your case:**

United States Bankruptcy Court for the:

WESTERN DISTRICT OF MICHIGAN

Case number (if known)

Chapter

**11**☐ Check if this an amended filing

## Official Form 201

**Voluntary Petition for Non-Individuals Filing for Bankruptcy**

04/20

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and the case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name **Residential Marketing Concepts, Inc.**

2. All other names debtor used in the last 8 years

Include any assumed names, trade names and *doing business as* names

**DBA Alternatives for Seniors**  
**DBA Senior Alternatives**  
**DBA Senior Living Placements**

3. Debtor's federal Employer Identification Number (EIN) **38-2963521**

4. Debtor's address

Principal place of business

Mailing address, if different from principal place of business

**9765 Golf Port**  
**Stanwood, MI 49346**

Number, Street, City, State &amp; ZIP Code

**1000 Woodkirk Lane**  
**Matthews, NC 28104-8053**

P.O. Box, Number, Street, City, State &amp; ZIP Code

**Mecosta**

County

**Location of principal assets, if different from principal place of business**

Number, Street, City, State &amp; ZIP Code

5. Debtor's website (URL) **alternativesforseniors.com**

6. Type of debtor

☒ Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP))☐ Partnership (excluding LLP)☐ Other. Specify: \_\_\_\_\_

Debtor **Residential Marketing Concepts, Inc.**  
Name

Case number (if known)

**7. Describe debtor's business** A. Check one:

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
- ☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
- ☐ Railroad (as defined in 11 U.S.C. § 101(44))
- ☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
- ☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
- ☐ Clearing Bank (as defined in 11 U.S.C. § 781(3))
- ☒ None of the above

## B. Check all that apply

- ☐ Tax-exempt entity (as described in 26 U.S.C. §501)
- ☐ Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. §80a-3)
- ☐ Investment advisor (as defined in 15 U.S.C. §80b-2(a)(11))

C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor.  
See <http://www.uscourts.gov/four-digit-national-association-naics-codes>.

5111**8. Under which chapter of the Bankruptcy Code is the debtor filing?** Check one:

- ☐ Chapter 7
- ☐ Chapter 9

☒ Chapter 11. Check **all** that apply:

A debtor who is a "small business debtor" must check the first sub-box. A debtor as defined in § 1182(1) who elects to proceed under subchapter V of chapter 11 (whether or not the debtor is a "small business debtor") must check the second sub-box.

- ☒ The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D), and its aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,725,625. If this sub-box is selected, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
- ☒ The debtor is a debtor as defined in 11 U.S.C. § 1182(1), its aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$7,500,000, **and it chooses to proceed under Subchapter V of Chapter 11**. If this sub-box is selected, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return, or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
- ☐ A plan is being filed with this petition.
- ☐ Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
- ☐ The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the *Attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11* (Official Form 201A) with this form.
- ☐ The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.

☐ Chapter 12**9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?**

- ☐ No.
- ☒ Yes.

If more than 2 cases, attach a separate list.

	<b>Eastern District of Michigan, Southern Division/Detroit</b>	When	<b>11/23/13</b>	Case number	<b>13-61366-pjs</b>
District		When		Case number	
District		When		Case number	

**10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?**

- ☐ No
- ☒ Yes.

List all cases. If more than 1, attach a separate list

Debtor **Anita Kremer-Frankovich**

Relationship

**President/Majority Shareholder**

Debtor **Residential Marketing Concepts, Inc.** Case number (if known) \_\_\_\_\_  
Name

District **Western District of  
North Carolina  
(Charlotte)** When **7/22/20** Case number, if known **20-30700**

---

Debtor **Residential Marketing Concepts, Inc.**  
Name

Case number (if known)

**11. Why is the case filed in this district?**

Check all that apply:

- ☒ Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.
- ☐ A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

**12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?**☒ No☐ Yes. Answer below for each property that needs immediate attention. Attach additional sheets if needed.**Why does the property need immediate attention?** (Check all that apply.)☐ It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.

What is the hazard? \_\_\_\_\_

☐ It needs to be physically secured or protected from the weather.☐ It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).☐ Other \_\_\_\_\_**Where is the property?** \_\_\_\_\_

Number, Street, City, State &amp; ZIP Code

**Is the property insured?**☐ No☐ Yes. Insurance agency \_\_\_\_\_

Contact name \_\_\_\_\_

Phone \_\_\_\_\_

**Statistical and administrative information****13. Debtor's estimation of available funds**

Check one:

- ☒ Funds will be available for distribution to unsecured creditors.
- ☐ After any administrative expenses are paid, no funds will be available to unsecured creditors.

**14. Estimated number of creditors**☒ 1-49☐ 50-99☐ 100-199☐ 200-999☐ 1,000-5,000☐ 5,001-10,000☐ 10,001-25,000☐ 25,001-50,000☐ 50,001-100,000☐ More than 100,000**15. Estimated Assets**☐ \$0 - \$50,000☐ \$50,001 - \$100,000☒ \$100,001 - \$500,000☐ \$500,001 - \$1 million☐ \$1,000,001 - \$10 million☐ \$10,000,001 - \$50 million☐ \$50,000,001 - \$100 million☐ \$100,000,001 - \$500 million☐ \$500,000,001 - \$1 billion☐ \$1,000,000,001 - \$10 billion☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion**16. Estimated liabilities**☐ \$0 - \$50,000☐ \$50,001 - \$100,000☐ \$100,001 - \$500,000☒ \$500,001 - \$1 million☐ \$1,000,001 - \$10 million☐ \$10,000,001 - \$50 million☐ \$50,000,001 - \$100 million☐ \$100,000,001 - \$500 million☐ \$500,000,001 - \$1 billion☐ \$1,000,000,001 - \$10 billion☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion

Debtor **Residential Marketing Concepts, Inc.**  
Name

Case number (if known)

**Request for Relief, Declaration, and Signatures****WARNING** -- Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.**17. Declaration and signature  
of authorized  
representative of debtor**

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I have been authorized to file this petition on behalf of the debtor.

I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on **October 16, 2020**  
MM / DD / YYYY**X /s/ Anita Kremer-Frankovich**  
Signature of authorized representative of debtor**Anita Kremer-Frankovich**  
Printed nameTitle **President****18. Signature of attorney****X /s/ Michael D. Lieberman**  
Signature of attorney for debtorDate **October 16, 2020**  
MM / DD / YYYY**Michael D. Lieberman P38529**  
Printed name**Lieberman & Cohen, PLLC**  
Firm name**31313 Northwestern Highway  
Suite 200  
Farmington Hills, MI 48334**  
Number, Street, City, State & ZIP CodeContact phone **248-539-5500**Email address **Mike@lgcpllc.com****P38529 MI**  
Bar number and State

**Fill in this information to identify the case:**Debtor name Residential Marketing Concepts, Inc.United States Bankruptcy Court for the: WESTERN DISTRICT OF MICHIGAN

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing

## Official Form 202

**Declaration Under Penalty of Perjury for Non-Individual Debtors**

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

**WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.**

**Declaration and signature**

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☒ *Schedule H: Codebtors* (Official Form 206H)
- ☒ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☐ Amended Schedule \_\_\_\_\_
- ☒ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration \_\_\_\_\_

I declare under penalty of perjury that the foregoing is true and correct.

Executed on October 16, 2020**X /s/ Anita Kremer-Frankovich**

Signature of individual signing on behalf of debtor

**Anita Kremer-Frankovich**

Printed name

**President**

Position or relationship to debtor

**Fill in this information to identify the case:**

Debtor name **Residential Marketing Concepts, Inc.**  
 United States Bankruptcy Court for the: **WESTERN DISTRICT OF MICHIGAN**  
 Case number (if known): \_\_\_\_\_

☐ Check if this is an  
 amended filing

**Official Form 204****Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders****12/15**

A list of creditors holding the 20 largest unsecured claims must be filed in a Chapter 11 or Chapter 9 case. Include claims which the debtor disputes. Do not include claims by any person or entity who is an insider, as defined in 11 U.S.C. § 101(31). Also, do not include claims by secured creditors, unless the unsecured claim resulting from inadequate collateral value places the creditor among the holders of the 20 largest unsecured claims.

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services, and government contracts)	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
American Express 200 Versey Street New York, NY 10285		Credit card purchases				\$16,000.00
Auto Owners 6101 Anacapi Blvd. Lansing, MI 48917		Insurance				\$360.00
Bank of America 2600 W Big Beaver Road Troy, MI 48084		Balance listed is approximate amount owed for business loan.				\$9,600.00
Blue Cross Blue Shield of Michigan PO Box 553174 Detroit, MI 48255-3174		Medical				\$250.00
S. Cody Engle 1206 Morningside Dr. Laguna Beach, CA 92651		Business Loan				\$70,000.00
Freeport Press, Inc. 2127 Reiser Ave., S.E. New Philadelphia, OH 44663						\$38,303.10
Harvey Goldsmith 48 Westbridge Road Westhampton Beach, NY 11978		Business loan				\$66,000.00
Google Inc. 1600 Amphitheatre Pkwy. Mountain View, CA 94043		Executory contract				\$308.33
Humana Healthcare Ins. Co. 500 West Main St. Louisville, KY 40202		Health Insurance				\$410.38

Debtor **Residential Marketing Concepts, Inc.**  
Name

Case number (if known)

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services,	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
Internal Revenue Service Centralized Insolvency Operations PO Box 7346 Philadelphia, PA 19101-7346		Federal Payroll Tax				\$35,443.46
Kapitus LLC 2500 Wilson Boulevard Suite 3500 Arlington, VA 22201	tmorgan@kapitusservicing.com	90 days or less: Accounts receivable (Approx. gross amount is \$153,511.00) Note: This amount consists of unearned income received in advance of prin	Disputed	\$165,163.75	\$48,511.00	\$116,652.75
LeaseHawk P.O. Box 29425 Phoenix, AZ 85038		Executory Contract				\$2,200.00
NC Department of Revenue P.O. Box 25000 Raleigh, NC 27640		Taxes				\$326.00
Nextiva 8800 E Chaparral Road Suite 300 Scottsdale, AZ 85250		Executory Contract				\$300.00
Printwell, Inc. 26975 Northline Rd. Taylor, MI 48180		Business loan and Account payable for open account purchases. Balance listed is estimated total balance for both claims.				\$135,000.00
Ruth Schwartz 8392 U Point 6 Lane Rapid River, MI 49878		Business Loan				\$20,000.00
Simax Web Development, LLC 9146 Lanigon Charlotte, NC 28277		Executory Contract				\$500.00
Sprint PCS PO Box 4181 Carol Stream, IL 60197-4181		Executory Contract				\$275.00



Debtor **Residential Marketing Concepts, Inc.**  
Name

Case number (if known)

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services,	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
<b>Trox Tech 7560 Charlotte Hwy. Fort Mill, SC 29707</b>		<b>Executory Contract</b>				<b>\$455.00</b>
<b>United Health Care Ins. Co. Dept CH 10151 Palatine, IL 60055</b>		<b>Insurance</b>				<b>\$252.51</b>

**Fill in this information to identify the case:**Debtor name **Residential Marketing Concepts, Inc.**United States Bankruptcy Court for the: **WESTERN DISTRICT OF MICHIGAN**

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing**Official Form 206Sum  
Summary of Assets and Liabilities for Non-Individuals****12/15****Part 1: Summary of Assets****1. Schedule A/B: Assets-Real and Personal Property** (Official Form 206A/B)

<b>1a. Real property:</b>	
Copy line 88 from <i>Schedule A/B</i> .....	\$ <b>0.00</b>
<b>1b. Total personal property:</b>	
Copy line 91A from <i>Schedule A/B</i> .....	\$ <b>111,519.20</b>
<b>1c. Total of all property:</b>	
Copy line 92 from <i>Schedule A/B</i> .....	\$ <b>111,519.20</b>

**Part 2: Summary of Liabilities**

<b>2. Schedule D: Creditors Who Have Claims Secured by Property</b> (Official Form 206D)	
Copy the total dollar amount listed in Column A, <i>Amount of claim</i> , from line 3 of <i>Schedule D</i> .....	\$ <b>165,163.75</b>
<b>3. Schedule E/F: Creditors Who Have Unsecured Claims</b> (Official Form 206E/F)	
<b>3a. Total claim amounts of priority unsecured claims:</b>	
Copy the total claims from Part 1 from line 5a of <i>Schedule E/F</i> .....	\$ <b>35,769.46</b>
<b>3b. Total amount of claims of nonpriority amount of unsecured claims:</b>	
Copy the total of the amount of claims from Part 2 from line 5b of <i>Schedule E/F</i> .....	+\$ <b>361,514.87</b>
<b>4. Total liabilities</b> .....	
Lines 2 + 3a + 3b	\$ <b>562,448.08</b>

**Fill in this information to identify the case:**Debtor name Residential Marketing Concepts, Inc.United States Bankruptcy Court for the: WESTERN DISTRICT OF MICHIGAN

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing**Official Form 206A/B****Schedule A/B: Assets - Real and Personal Property**

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

**Part 1: Cash and cash equivalents****1. Does the debtor have any cash or cash equivalents?**

- ☐ No. Go to Part 2.  
☒ Yes Fill in the information below.

**All cash or cash equivalents owned or controlled by the debtor****Current value of debtor's interest****3. Checking, savings, money market, or financial brokerage accounts (Identify all)**

Name of institution (bank or brokerage firm)

Type of account

Last 4 digits of account number

**Chase Bank-Account subject to IRS**  
 3.1. **levy**

**Checking account****0959****\$3,942.20****4. Other cash equivalents (Identify all)****5. Total of Part 1.**

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

**\$3,942.20****Part 2: Deposits and Prepayments****6. Does the debtor have any deposits or prepayments?**

- ☐ No. Go to Part 3.  
☒ Yes Fill in the information below.

**7. Deposits, including security deposits and utility deposits**

Description, including name of holder of deposit

7.1. **Deposits from customers (Approximate amount)****\$56,366.00****8. Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent**

Description, including name of holder of prepayment

**9. Total of Part 2.**

Add lines 7 through 8. Copy the total to line 81.

**\$56,366.00**

**10. Does the debtor have any accounts receivable?**

- 11.
- Accounts receivable**

11a. 90 days old or less:	<u>48,511.00</u>	-	<u>0.00</u>	= ....	<u>\$48,511.00</u>
	face amount		doubtful or uncollectible accounts		

12. **Total of Part 3.**

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

**\$48,511.00**

**13. Does the debtor own any investments?**

- ## Part 5: Inventory, excluding agriculture assets

**18. Does the debtor own any inventory (excluding agriculture assets)?**

- ☐ No. Go to Part 6.
- ☒ Yes Fill in the information below.

	General description	Date of the last physical inventory	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
19.	Raw materials				
20.	Work in progress				
21.	Finished goods, including goods held for resale				
22.	Other inventory or supplies				
	Books, printed but not distributed. Inventory is for restocking purposes, but the books have no resale value.		\$0.00		\$0.00

23. **Total of Part 5.**

Add lines 19 through 22. Copy the total to line 84.

**\$0.00**

24. Is any of the property listed in Part 5 perishable?

- ☐ No  
☐ Yes

25. **Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?**

- |  | Valuation method | Current Value |
|--|------------------|---------------|
| <input type="checkbox"/> No              |                  |               |
| <input type="checkbox"/> Yes. Book value |                  |               |

26. **Has any of the property listed in Part 5 been appraised by a professional within the last year?**

- ☐ No  
☐ Yes

Debtor Residential Marketing Concepts, Inc.  
Name

Case number (If known) \_\_\_\_\_

**Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)**

27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?

- ☒ No. Go to Part 7.  
☐ Yes Fill in the information below.

**Part 7: Office furniture, fixtures, and equipment; and collectibles**

38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?

- ☐ No. Go to Part 8.  
☒ Yes Fill in the information below.

	General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39.	Office furniture			
40.	Office fixtures Office furniture--Value is included in description above.	\$0.00		\$0.00
41.	Office equipment, including all computer equipment and communication systems equipment and software Office Equipment: Desk, Chair, Credenza, File Cabinets-2 drawer, Computers (3-1 used Mac), Printers (3)	\$0.00		\$2,500.00
	Phone system. System is an older system. Value is estimated.	\$0.00		\$200.00
42.	<b>Collectibles</b> Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles			
43.	<b>Total of Part 7.</b> Add lines 39 through 42. Copy the total to line 86.			\$2,700.00
44.	<b>Is a depreciation schedule available for any of the property listed in Part 7?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
45.	<b>Has any of the property listed in Part 7 been appraised by a professional within the last year?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

**Part 8: Machinery, equipment, and vehicles**

46. Does the debtor own or lease any machinery, equipment, or vehicles?

- ☒ No. Go to Part 9.  
☐ Yes Fill in the information below.

**Part 9: Real property**

54. Does the debtor own or lease any real property?

- ☒ No. Go to Part 10.

Debtor Residential Marketing Concepts, Inc.  
Name

Case number (If known) \_\_\_\_\_

☐ Yes Fill in the information below.**Part 10: Intangibles and intellectual property****59. Does the debtor have any interests in intangibles or intellectual property?**☐ No. Go to Part 11.☒ Yes Fill in the information below.

	General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
60.	Patents, copyrights, trademarks, and trade secrets Trademark on Alternatives for Seniors. Believed to have no value	\$0.00	N/A	\$0.00
61.	Internet domain names and websites www.alternatives for seniors.com	Unknown	N/A	Unknown
62.	Licenses, franchises, and royalties			
63.	Customer lists, mailing lists, or other compilations Customer list	\$0.00		Unknown
64.	Other intangibles, or intellectual property			
65.	Goodwill			
66.	<b>Total of Part 10.</b> Add lines 60 through 65. Copy the total to line 89.			\$0.00
67.	<b>Do your lists or records include personally identifiable information of customers</b> (as defined in 11 U.S.C. §§ 101(41A) and 107?) <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
68.	<b>Is there an amortization or other similar schedule available for any of the property listed in Part 10?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
69.	<b>Has any of the property listed in Part 10 been appraised by a professional within the last year?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

**Part 11: All other assets****70. Does the debtor own any other assets that have not yet been reported on this form?**

Include all interests in executory contracts and unexpired leases not previously reported on this form.

☒ No. Go to Part 12.☐ Yes Fill in the information below.

Debtor **Residential Marketing Concepts, Inc.**  
Name

Case number (If known)

**Part 12: Summary**

In Part 12 copy all of the totals from the earlier parts of the form

Type of property	Current value of personal property	Current value of real property
80. <b>Cash, cash equivalents, and financial assets.</b> <i>Copy line 5, Part 1</i>	<b>\$3,942.20</b>	
81. <b>Deposits and prepayments.</b> <i>Copy line 9, Part 2.</i>	<b>\$56,366.00</b>	
82. <b>Accounts receivable.</b> <i>Copy line 12, Part 3.</i>	<b>\$48,511.00</b>	
83. <b>Investments.</b> <i>Copy line 17, Part 4.</i>	<b>\$0.00</b>	
84. <b>Inventory.</b> <i>Copy line 23, Part 5.</i>	<b>\$0.00</b>	
85. <b>Farming and fishing-related assets.</b> <i>Copy line 33, Part 6.</i>	<b>\$0.00</b>	
86. <b>Office furniture, fixtures, and equipment; and collectibles.</b> <i>Copy line 43, Part 7.</i>	<b>\$2,700.00</b>	
87. <b>Machinery, equipment, and vehicles.</b> <i>Copy line 51, Part 8.</i>	<b>\$0.00</b>	
88. <b>Real property.</b> <i>Copy line 56, Part 9.....&gt;</i>		<b>\$0.00</b>
89. <b>Intangibles and intellectual property.</b> <i>Copy line 66, Part 10.</i>	<b>\$0.00</b>	
90. <b>All other assets.</b> <i>Copy line 78, Part 11.</i>	<b>\$0.00</b>	
91. <b>Total.</b> Add lines 80 through 90 for each column	<b>\$111,519.20</b>	<b>\$0.00</b>
92. <b>Total of all property on Schedule A/B.</b> Add lines 91a+91b=92		<b>\$111,519.20</b>

**Fill in this information to identify the case:**Debtor name **Residential Marketing Concepts, Inc.**United States Bankruptcy Court for the: **WESTERN DISTRICT OF MICHIGAN**

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing**Official Form 206D****Schedule D: Creditors Who Have Claims Secured by Property****12/15**

Be as complete and accurate as possible.

**1. Do any creditors have claims secured by debtor's property?**

- ☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

**Part 1: List Creditors Who Have Secured Claims**

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

		Column A Amount of claim  Do not deduct the value of collateral.	Column B Value of collateral that supports this claim
<b>2.1</b>	<b>Kapitus LLC</b> <small>Creditor's Name</small>  <b>2500 Wilson Boulevard Suite 3500 Arlington, VA 22201</b> <small>Creditor's mailing address</small>  <b>tmorgan@kapitus servicing. com</b> <small>Creditor's email address, if known</small>  <b>Date debt was incurred</b> <b>3/15/2019</b> <b>Last 4 digits of account number</b> <b>1311</b> <b>Do multiple creditors have an interest in the same property?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.	<b>Describe debtor's property that is subject to a lien</b> <b>90 days or less: Accounts receivable (Approx. gross amount is \$153,511.00) Note: This amount consists of unearned income received in advance of printing and will be offset by printing, freight and other expenses. Estimated to be \$105,000.</b>  <b>Describe the lien</b> <b>Non-Purchase Money Security</b> <b>Is the creditor an insider or related party?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <b>Is anyone else liable on this claim?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)  <b>As of the petition filing date, the claim is:</b> Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	<b>\$165,163.75</b>  <b>\$48,511.00</b>

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.

**\$165,163.75****Part 2: List Others to Be Notified for a Debt Already Listed in Part 1**

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Name and address	On which line in Part 1 did you enter the related creditor?	Last 4 digits of account number for this entity
<b>Colonial Funding Network 520 Silicon Dr., Ste 110 Southlake, TX 76092</b>	Line <b>2.1</b>	



Debtor **Residential Marketing Concepts, Inc.**

Case number (if known)

Name

**Colonial Funding Network**  
**2500 Wilson Boulevard**  
**Arlington, VA 22201**

Line 2.1

**Colonial Funding Network, Inc.**  
**c/o The Nguyen Law Firm, PLC**  
**100 Arbor Oak Drive, Suite 206**  
**PO Box 1958**  
**Ashland, VA 23005**

Line 2.1

**Invision Funding, LLC**  
**Qualified Merchant Group**  
**2500 Wilson Boulevard**  
**Arlington, VA 22201**

Line 2.1

**Kapitus**  
**120 W. 45th Street**  
**New York, NY 10036**

Line 2.1

**Kapitus Servicing, Inc.**  
**2500 Wilson Boulevard**  
**Suite 350**  
**Arlington, VA 22201**

Line 2.1

**Kapitus Servicing, Inc.**  
**Attn: Tapeka Morgan**  
**2500 Wilson Boulevard**  
**Suite 350**  
**Arlington, VA 22201**

Line 2.1

**Kapitus Servicing, Inc.**  
**C. Daniel ~Waters, Esq.**  
**The Nguyen Law Firm PLC**  
**2201 Libbie Ave.**  
**Richmond, VA 23230**

Line 2.1

**Key Star Capital**  
**4100 Greenbriar suite 120**  
**Stafford, TX 77477**

Line 2.1

**Key Star Capital Fund II, L.P.**  
**P.O. Box 1068**  
**Stafford, TX 77497-1068**

Line 2.1

**Fill in this information to identify the case:**Debtor name **Residential Marketing Concepts, Inc.**United States Bankruptcy Court for the: **WESTERN DISTRICT OF MICHIGAN**

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing**Official Form 206E/F****Schedule E/F: Creditors Who Have Unsecured Claims**

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

**Part 1: List All Creditors with PRIORITY Unsecured Claims**

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

☐ No. Go to Part 2.☒ Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

		Total claim	Priority amount
2.1	Priority creditor's name and mailing address <b>Internal Revenue Service Centralized Insolvency Operations PO Box 7346 Philadelphia, PA 19101-7346</b>  Date or dates debt was incurred _____  Last 4 digits of account number <b>3521</b> Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <b>Federal Payroll Tax</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$35,443.46</b> <b>\$0.00</b>
2.2	Priority creditor's name and mailing address <b>NC Department of Revenue P.O. Box 25000 Raleigh, NC 27640</b>  Date or dates debt was incurred _____  Last 4 digits of account number <b>2633</b> Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <b>Taxes</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$326.00</b> <b>\$0.00</b>

**Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

**Amount of claim**

Debtor **Residential Marketing Concepts, Inc.**  
Name

Case number (if known)

3.1	<b>Nonpriority creditor's name and mailing address</b> <b>Adobe</b> <b>345 Park Avenue</b> <b>San Jose, CA 95110</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u><b>Executory Contract</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$56.57</b>
3.2	<b>Nonpriority creditor's name and mailing address</b> <b>AFLAC</b> <b>1932 Wynnton Road</b> <b>Columbus, GA 31993</b> Date(s) debt was incurred ____ Last 4 digits of account number <u><b>5829</b></u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$136.56</b>
3.3	<b>Nonpriority creditor's name and mailing address</b> <b>American Express</b> <b>200 Versey Street</b> <b>New York, NY 10285</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u><b>Credit card purchases</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$16,000.00</b>
3.4	<b>Nonpriority creditor's name and mailing address</b> <b>AppRiver</b> <b>1101 Gulf Breeze Parkway</b> <b>Suite 200</b> <b>Gulf Breeze, FL 32561-4858</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u><b>Executory Contract</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$129.50</b>
3.5	<b>Nonpriority creditor's name and mailing address</b> <b>Auto Owners</b> <b>6101 Anacapri Blvd.</b> <b>Lansing, MI 48917</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u><b>Insurance</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$360.00</b>
3.6	<b>Nonpriority creditor's name and mailing address</b> <b>Bank of America</b> <b>2600 W Big Beaver Road</b> <b>Troy, MI 48084</b> Date(s) debt was incurred <u><b>various</b></u> Last 4 digits of account number <u><b>9687</b></u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u><b>Balance listed is approximate amount owed for business loan.</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$9,600.00</b>
3.7	<b>Nonpriority creditor's name and mailing address</b> <b>Blue Cross Blue Shield of Michigan</b> <b>PO Box 553174</b> <b>Detroit, MI 48255-3174</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u><b>Medical</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$250.00</b>

Debtor **Residential Marketing Concepts, Inc.**  
Name

Case number (if known)

3.8	<b>Nonpriority creditor's name and mailing address</b> <b>Dropbox</b> <b>185 Berry</b> <b>4th Floor</b> <b>San Francisco, CA 94107</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u><b>Executory Contract</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$100.00</b>
3.9	<b>Nonpriority creditor's name and mailing address</b> <b>S. Cody Engle</b> <b>1206 Morningside Dr.</b> <b>Laguna Beach, CA 92651</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u><b>Business Loan</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$70,000.00</b>
3.10	<b>Nonpriority creditor's name and mailing address</b> <b>Freeport Press, Inc.</b> <b>2127 Reiser Ave., S.E.</b> <b>New Philadelphia, OH 44663</b> Date(s) debt was incurred ____ Last 4 digits of account number <u><b>1621</b></u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$38,303.10</b>
3.11	<b>Nonpriority creditor's name and mailing address</b> <b>Harvey Goldsmith</b> <b>48 Westbridge Road</b> <b>Westhampton Beach, NY 11978</b> Date(s) debt was incurred <u><b>June, July 2013</b></u> Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u><b>Business loan</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$66,000.00</b>
3.12	<b>Nonpriority creditor's name and mailing address</b> <b>Google Inc.</b> <b>1600 Amphitheatre Pkwy.</b> <b>Mountain View, CA 94043</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u><b>Executory contract</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$308.33</b>
3.13	<b>Nonpriority creditor's name and mailing address</b> <b>Humana Healthcare Ins. Co.</b> <b>500 West Main St.</b> <b>Louisville, KY 40202</b> Date(s) debt was incurred <u><b>Monthly</b></u> Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u><b>Health Insurance</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$410.38</b>
3.14	<b>Nonpriority creditor's name and mailing address</b> <b>IN Fullcontrol</b> <b>14400 College Blvd.</b> <b>Suite 103</b> <b>Lenexa, KS 66215</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u><b>Executory Contract</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$185.55</b>

Debtor **Residential Marketing Concepts, Inc.**  
Name

Case number (if known)

3.15	<b>Nonpriority creditor's name and mailing address</b> <b>LeaseHawk</b> <b>P.O. Box 29425</b> <b>Phoenix, AZ 85038</b> Date(s) debt was incurred ____ Last 4 digits of account number <u>8167</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Executory Contract</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$2,200.00</b>
3.16	<b>Nonpriority creditor's name and mailing address</b> <b>Life Storage</b> <b>6467 Main Street</b> <b>Roseville, CA 95661</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Executory Contract</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$54.99</b>
3.17	<b>Nonpriority creditor's name and mailing address</b> <b>Mailchimp</b> <b>675 Ponce de Leon Ave, NE</b> <b>Suite 5000</b> <b>Atlanta, GA 30308</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Executory Contract</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$54.99</b>
3.18	<b>Nonpriority creditor's name and mailing address</b> <b>Nextiva</b> <b>8800 E Chaparral Road</b> <b>Suite 300</b> <b>Scottsdale, AZ 85250</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Executory Contract</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$300.00</b>
3.19	<b>Nonpriority creditor's name and mailing address</b> <b>Printwell, Inc.</b> <b>26975 Northline Rd.</b> <b>Taylor, MI 48180</b> Date(s) debt was incurred <u>Various</u> Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Business loan and Account payable for open account purchases. Balance listed is estimated total balance for both claims.</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$135,000.00</b>
3.20	<b>Nonpriority creditor's name and mailing address</b> <b>Sage Software</b> <b>271 17th St, NW</b> <b>Atlanta, GA 30363</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Executory Contract</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$150.35</b>
3.21	<b>Nonpriority creditor's name and mailing address</b> <b>Ruth Schwartz</b> <b>8392 U Point 6 Lane</b> <b>Rapid River, MI 49878</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Business Loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$20,000.00</b>

Debtor **Residential Marketing Concepts, Inc.**  
Name

Case number (if known)

3.22	<b>Nonpriority creditor's name and mailing address</b> <b>Simax Web Development, LLC</b> <b>9146 Lanigon</b> <b>Charlotte, NC 28277</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u><b>Executory Contract</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$500.00</b>
3.23	<b>Nonpriority creditor's name and mailing address</b> <b>Sirius</b> <b>1221 Avenue of the Americas</b> <b>36th Floor</b> <b>New York, NY 10020</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u><b>Executory Contract</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$44.05</b>
3.24	<b>Nonpriority creditor's name and mailing address</b> <b>Spectrum Business</b> <b>P.O. Box 3019</b> <b>Milwaukee, WI 53201</b> Date(s) debt was incurred ____ Last 4 digits of account number <u><b>6994</b></u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u><b>Executory Contract</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$170.00</b>
3.25	<b>Nonpriority creditor's name and mailing address</b> <b>Sprint PCS</b> <b>PO Box 4181</b> <b>Carol Stream, IL 60197-4181</b> Date(s) debt was incurred ____ Last 4 digits of account number <u><b>6546</b></u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u><b>Executory Contract</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$275.00</b>
3.26	<b>Nonpriority creditor's name and mailing address</b> <b>Stamps.com</b> <b>P.O. Box 6022</b> <b>Inglewood, CA 90312</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u><b>Executory Contract</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$17.99</b>
3.27	<b>Nonpriority creditor's name and mailing address</b> <b>The Hartford</b> <b>P.O. Box 660916</b> <b>Dallas, TX 75266</b> Date(s) debt was incurred ____ Last 4 digits of account number <u><b>9277</b></u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u><b>Insurance</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$200.00</b>
3.28	<b>Nonpriority creditor's name and mailing address</b> <b>Trox Tech</b> <b>7560 Charlotte Hwy.</b> <b>Fort Mill, SC 29707</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u><b>Executory Contract</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$455.00</b>

Debtor **Residential Marketing Concepts, Inc.**  
Name

Case number (if known)

3.29 Nonpriority creditor's name and mailing address

**United Health Care Ins. Co.**  
**Dept CH 10151**  
**Palatine, IL 60055**

Date(s) debt was incurred

Last 4 digits of account number 0522As of the petition filing date, the claim is: *Check all that apply.***\$252.51**

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: **Insurance**Is the claim subject to offset? ☒ No ☐ Yes**Part 3: List Others to Be Notified About Unsecured Claims**

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

	Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.1	<b>Bank of America, N.A.</b> <b>P.O. Box 45144</b> <b>FL9-100-04-24</b> <b>Building 100 4th Floor</b> <b>Jacksonville, FL 32232-9923</b>	Line <u>3.6</u>  <input type="checkbox"/> Not listed. Explain _____	<u>9687</u>
4.2	<b>EFTPS</b> <b>P.O. Box 802501</b> <b>Cincinnati, OH 45280</b>	Line <u>2.1</u>  <input type="checkbox"/> Not listed. Explain _____	—
4.3	<b>Michael Fleming</b> <b>Plunkett Cooney</b> <b>38505 Woodward Ave.</b> <b>Suite 100</b> <b>Bloomfield Hills, MI 48304</b>	Line <u>3.6</u>  <input type="checkbox"/> Not listed. Explain _____	—
4.4	<b>Internal Revenue Service</b> <b>10715 David Taylor Drive</b> <b>Charlotte, NC 28262</b>	Line <u>2.1</u>  <input type="checkbox"/> Not listed. Explain _____	—

**Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims**

5. Add the amounts of priority and nonpriority unsecured claims.

5a. Total claims from Part 1

5b. Total claims from Part 2

5c. Total of Parts 1 and 2

Lines 5a + 5b = 5c.

Total of claim amounts	
5a.	\$ <b>35,769.46</b>
5b. +	\$ <b>361,514.87</b>
5c.	\$ <b>397,284.33</b>

**Fill in this information to identify the case:**Debtor name **Residential Marketing Concepts, Inc.**United States Bankruptcy Court for the: **WESTERN DISTRICT OF MICHIGAN**

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing**Official Form 206G****Schedule G: Executory Contracts and Unexpired Leases**

12/15

**Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.****1. Does the debtor have any executory contracts or unexpired leases?**☐ No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form.☒ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal**Property*

(Official Form 206A/B).

**2. List all contracts and unexpired leases****State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**2.1. State what the contract or lease is for and the nature of the debtor's interest **Computer support \$56.57/mo.**

State the term remaining

List the contract number of any government contract \_\_\_\_\_

**Adobe  
345 Park Avenue  
San Jose, CA 95110**2.2. State what the contract or lease is for and the nature of the debtor's interest **Email provider. \$129.50/Mo.**

State the term remaining

List the contract number of any government contract \_\_\_\_\_

**AppRiver  
1101 Gulf Breeze Parkway  
Suite 200  
Gulf Breeze, FL 32561-4858**2.3. State what the contract or lease is for and the nature of the debtor's interest **Cloud Server. \$100/mo.**

State the term remaining

List the contract number of any government contract \_\_\_\_\_

**Dropbox  
185 Berry  
4th Floor  
San Francisco, CA 94107**2.4. State what the contract or lease is for and the nature of the debtor's interest **Web Service. \$308.33/mo.**

State the term remaining

List the contract number of any government contract \_\_\_\_\_

**Google Inc.  
1600 Amphitheatre Pkwy.  
Mountain View, CA 94043**



Debtor 1 **Residential Marketing Concepts, Inc.**

First Name

Middle Name

Last Name

Case number (if known)

**Additional Page if You Have More Contracts or Leases****2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

- 2.5. State what the contract or lease is for and the nature of the debtor's interest **Health insurance. \$410.38/mo.**

State the term remaining

List the contract number of any government contract

**Humana Healthcare Ins. Co.  
500 West Main St.  
Louisville, KY 40202**

- 2.6. State what the contract or lease is for and the nature of the debtor's interest **Web site server.185.55/mo.**

State the term remaining

List the contract number of any government contract

**IN Fullcontrol  
14400 College Blvd.  
Suite 103  
Lenexa, KS 66215**

- 2.7. State what the contract or lease is for and the nature of the debtor's interest **Toll Free Number provider. \$1,614.00/mo.**

State the term remaining

List the contract number of any government contract

**LeaseHawk  
P.O. Box 29425  
Phoenix, AZ 85038**

- 2.8. State what the contract or lease is for and the nature of the debtor's interest **Storage Unit. \$154.99/mo.**

State the term remaining

List the contract number of any government contract

**Life Storage  
6467 Main Street  
Roseville, CA 95661**

- 2.9. State what the contract or lease is for and the nature of the debtor's interest **Automated Web Email Server. \$54.99/mo.**

State the term remaining

List the contract number of any government contract

**Mailchimp  
675 Ponce de Leon Ave, NE  
Suite 5000  
Atlanta, GA 30308**

- 2.10. State what the contract or lease is for and the nature of the debtor's interest **Phone service provider. \$300.00/mo.**

State the term remaining

List the contract number of any government contract

**Nextiva  
8800 E Chaparral Road  
Suite 300  
Scottsdale, AZ 85250**

Debtor 1 **Residential Marketing Concepts, Inc.**

First Name

Middle Name

Last Name

Case number (if known)

**Additional Page if You Have More Contracts or Leases****2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

government contract

2.11. State what the contract or lease is for and the nature of the debtor's interest

**Software license-Accounting System. \$150.35/mo.**

State the term remaining

List the contract number of any government contract

**Sage Software  
271 17th St, NW  
Atlanta, GA 30363**

2.12. State what the contract or lease is for and the nature of the debtor's interest

**Web site Admin. support. \$500/mo.**

State the term remaining

List the contract number of any government contract

**Simax Web Development, LLC  
9146 Lanigon  
Charlotte, NC 28277**

2.13. State what the contract or lease is for and the nature of the debtor's interest

**Satellite Radio subscription. \$44.05/mo.**

State the term remaining

List the contract number of any government contract

**Sirius  
1221 Avenue of the Americas  
36th Floor  
New York, NY 10020**

2.14. State what the contract or lease is for and the nature of the debtor's interest

**Phone/Internet service. \$170/mo.**

State the term remaining

List the contract number of any government contract

**Spectrum Business  
P.O. Box 3019  
Milwaukee, WI 53201**

2.15. State what the contract or lease is for and the nature of the debtor's interest

**Cell phone contracts (2 contracts - multiple lines)**

State the term remaining

List the contract number of any government contract

**Sprint PCS  
PO Box 4181  
Carol Stream, IL 60197-4181**

2.16. State what the contract or lease is for and the nature of the debtor's interest

**Postage. \$17.99/mo.****Stamps.com  
P.O. Box 6022  
Inglewood, CA 90312**

Debtor 1 **Residential Marketing Concepts, Inc.**

First Name

Middle Name

Last Name

Case number (if known)

**Additional Page if You Have More Contracts or Leases****2. List all contracts and unexpired leases**

**State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**

State the term remaining

List the contract number of any  
government contract

2.17. State what the contract or lease is for and the nature of the debtor's interest **IT support. \$455.00/mo.**

State the term remaining

List the contract number of any  
government contract

**Trox Tech  
7560 Charlotte Hwy.  
Fort Mill, SC 29707**

**Fill in this information to identify the case:**Debtor name Residential Marketing Concepts, Inc.United States Bankruptcy Court for the: WESTERN DISTRICT OF MICHIGAN

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing**Official Form 206H  
Schedule H: Your Codebtors**

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

**1. Do you have any codebtors?**☐ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.☒ Yes

**2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.**

*Column 1: Codebtor**Column 2: Creditor***Name****Mailing Address****Name***Check all schedules that apply:*

2.1 **Anita Kremer-Frankovich**  
**1000 Woodkirk Lane**  
**Matthews, NC 28104-8053**

**Bank of America**☐ D \_\_\_\_\_☒ E/F 3.6☐ G \_\_\_\_\_

2.2 **Anita Kremer-Frankovich**  
**1000 Woodkirk Lane**  
**Matthews, NC 28104-8053**

**Kapitus LLC**☒ D 2.1☐ E/F \_\_\_\_\_☐ G \_\_\_\_\_

**Fill in this information to identify the case:**Debtor name Residential Marketing Concepts, Inc.United States Bankruptcy Court for the: WESTERN DISTRICT OF MICHIGAN

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing**Official Form 207****Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy**

04/19

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

**Part 1: Income****1. Gross revenue from business**☐ None.**Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year****Sources of revenue**  
Check all that apply**Gross revenue**  
(before deductions and exclusions)**From the beginning of the fiscal year to filing date:**From 1/01/2020 to **Filing Date**☒ Operating a business\$457,000.00☐ Other \_\_\_\_\_**For prior year:**From 1/01/2019 to 12/31/2019☒ Operating a business\$610,511.00☐ Other \_\_\_\_\_**For year before that:**From 1/01/2018 to 12/31/2018☒ Operating a business\$805,977.00☐ Other \_\_\_\_\_**2017**From / / to 12/31/1999☒ Operating a business\$848,001.00☐ Other \_\_\_\_\_**2. Non-business revenue**

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

☒ None.**Description of sources of revenue****Gross revenue from each source**  
(before deductions and exclusions)**Part 2: List Certain Transfers Made Before Filing for Bankruptcy****3. Certain payments or transfers to creditors within 90 days before filing this case**

List payments or transfers--including expense reimbursements--to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$6,825. (This amount may be adjusted on 4/01/22 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

Debtor **Residential Marketing Concepts, Inc.**

Case number (if known) \_\_\_\_\_

☐ None.

Creditor's Name and Address	Dates	Total amount of value	Reasons for payment or transfer <i>Check all that apply</i>
3.1. <b>American Express 200 Versey Street New York, NY 10285</b>	<b>6/24/2020</b>	<b>\$10,957.22</b>	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other <b><u>Corporate credit card purchases relating to business.</u></b>

**4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider**

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$6,825. (This amount may be adjusted on 4/01/22 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

☒ None.

Insider's name and address Relationship to debtor	Dates	Total amount of value	Reasons for payment or transfer
--	-------	-----------------------	---------------------------------

**5. Repossessions, foreclosures, and returns**

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

☐ None

Creditor's name and address	Describe of the Property	Date	Value of property
<b>Internal Revenue Service C. Smith Revenue Officer Charlotte, NC 28262</b>	<b>Levies on Bank account and on clients and former clients. Value of property amount is approximate.</b>	<b>10/6/2020</b>	<b>\$15,000.00</b>

**6. Setoffs**

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

☒ None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
-----------------------------	---	-----------------------	--------

**Part 3: Legal Actions or Assignments****7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits**

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

Debtor **Residential Marketing Concepts, Inc.**

Case number (if known)

☐ None.

	Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.1.	<b>Kapitus Servicing, Inc. v. Residential Marketing Concepts, Inc. et. al. CL20-986</b>	<b>Collection/Breach of Contract</b>	<b>Arlington County Circuit Court 1425 North Court House Road Room 6700 Arlington, VA 22201-2685</b>	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded

**8. Assignments and receivership**

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

☒ None**Part 4: Certain Gifts and Charitable Contributions****9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000**☒ None

Recipient's name and address	Description of the gifts or contributions	Dates given	Value
------------------------------	---	-------------	-------

**Part 5: Certain Losses****10. All losses from fire, theft, or other casualty within 1 year before filing this case.**☒ None

Description of the property lost and how the loss occurred	Amount of payments received for the loss	Dates of loss	Value of property lost
	<p>If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received.</p> <p>List unpaid claims on Official Form 106A/B (<i>Schedule A/B: Assets – Real and Personal Property</i>).</p>		

**Part 6: Certain Payments or Transfers****11. Payments related to bankruptcy**

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

☐ None.

Who was paid or who received the transfer? Address	If not money, describe any property transferred	Dates	Total amount or value
---	---	-------	-----------------------

Case number (if known)

**Who made the payment, if not debtor?**

☐ None.

☐ None.

## Part 7: Previous Locations

■ Does not apply



Debtor **Residential Marketing Concepts, Inc.**

Case number (if known)

Address

Dates of occupancy  
From-To**Part 8: Health Care Bankruptcies****15. Health Care bankruptcies**

Is the debtor primarily engaged in offering services and facilities for:

- diagnosing or treating injury, deformity, or disease, or
- providing any surgical, psychiatric, drug treatment, or obstetric care?

- ☐ No. Go to Part 9.
- ☐ Yes. Fill in the information below.

Facility name and address

Nature of the business operation, including type of services  
the debtor providesIf debtor provides meals  
and housing, number of  
patients in debtor's care**Part 9: Personally Identifiable Information****16. Does the debtor collect and retain personally identifiable information of customers?**

- ☐ No.
- ☐ Yes. State the nature of the information collected and retained.

**17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit?**

- ☐ No. Go to Part 10.
- ☐ Yes. Does the debtor serve as plan administrator?

**Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units****18. Closed financial accounts**

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

- ☐ None

Financial Institution name and  
AddressLast 4 digits of  
account numberType of account or  
instrumentDate account was  
closed, sold,  
moved, or  
transferredLast balance  
before closing or  
transfer**19. Safe deposit boxes**

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

- ☐ None

Depository institution name and address

Names of anyone with  
access to it  
Address

Description of the contents

Do you still  
have it?**20. Off-premises storage**

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

- ☐ None

Facility name and address

Names of anyone with  
access to it

Description of the contents

Do you still  
have it?

Debtor **Residential Marketing Concepts, Inc.**

Case number (if known) \_\_\_\_\_

**Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own****21. Property held for another**

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

☒ None

**Part 12: Details About Environment Information**

For the purpose of Part 12, the following definitions apply:

*Environmental law* means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).

*Site* means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.

*Hazardous material* means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

Report all notices, releases, and proceedings known, regardless of when they occurred.

**22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.**

- ☒ No.  
☐ Yes. Provide details below.

Case title  
Case number

Court or agency name and  
address

Nature of the case

Status of case

**23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?**

- ☒ No.  
☐ Yes. Provide details below.

Site name and address

Governmental unit name and  
address

Environmental law, if known

Date of notice

**24. Has the debtor notified any governmental unit of any release of hazardous material?**

- ☒ No.  
☐ Yes. Provide details below.

Site name and address

Governmental unit name and  
address

Environmental law, if known

Date of notice

**Part 13: Details About the Debtor's Business or Connections to Any Business****25. Other businesses in which the debtor has or has had an interest**

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

☐ None

Business name address

Describe the nature of the business

Employer Identification number

Do not include Social Security number or ITIN.

Dates business existed

25.1. **Residential Marketing  
Concepts, Inc.  
9765 Golf Port  
Stanwood, MI 49346**

**Subscription based advertising**

EIN: **38-2963521**

From-To **1990 - present**

**26. Books, records, and financial statements**

Debtor **Residential Marketing Concepts, Inc.**

Case number (if known)

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

☐ None

Name and address	Date of service From-To
26a.1. <b>Anita Kremer-Frankovich</b> <b>1000 Woodkirk Lane</b> <b>Matthews, NC 28104</b>	<b>1990 - present</b>
26a.2. <b>Daniel Ratliff &amp; Co.</b> <b>2815 Coliseum Centre Dr., Ste. 200</b> <b>Charlotte, NC 28217</b>	<b>2018 - present</b>

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

☒ None

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

☐ None

Name and address	If any books of account and records are unavailable, explain why
26c.1. <b>Anita Kremer Frankovich</b>	<b>1990 - present</b>

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

☒ None**Name and address****27. Inventories**

Have any inventories of the debtor's property been taken within 2 years before filing this case?

☒ No☐ Yes. Give the details about the two most recent inventories.

Name of the person who supervised the taking of the inventory	Date of inventory	The dollar amount and basis (cost, market, or other basis) of each inventory
---	-------------------	--

28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

Name	Address	Position and nature of any interest	% of interest, if any
<b>Anita Kremer-Frankovich</b>	<b>1000 Woodkirk Lane</b> <b>Matthews, NC 28104</b>	<b>president</b>	<b>Majority shareholder--</b> <b>65% ownership</b> <b>Sole director</b>
Name	Address	Position and nature of any interest	% of interest, if any
<b>Harvey Goldsmith</b>	<b>48 Westbridge Road</b> <b>Westhampton Beach, NY 11978</b>	<b>Minority Shareholder</b>	<b>Shareholder--</b> <b>35% ownership</b>

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

Debtor **Residential Marketing Concepts, Inc.**

Case number (if known) \_\_\_\_\_

- ☒ No  
☐ Yes. Identify below.

**30. Payments, distributions, or withdrawals credited or given to insiders**

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

- ☐ No  
☒ Yes. Identify below.

	Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
30.1	Anita Kremer-Frankovich 1000 Woodkirk Lane Matthews, NC 28104	Regular salary: Payroll \$10,000/month paid bi-monthly (\$5,000/pay period) Health insurance, AFLAC (\$800/month est.)	Regular salary and benefits--pay ments as indicated.	
	Relationship to debtor Majority Shareholder			

**31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?**

- ☒ No  
☐ Yes. Identify below.

Name of the parent corporation

Employer Identification number of the parent corporation

**32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?**

- ☒ No  
☐ Yes. Identify below.

Name of the pension fund

Employer Identification number of the parent corporation

**Part 14: Signature and Declaration**

**WARNING** -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both.  
 18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on **October 16, 2020****/s/ Anita Kremer-Frankovich**

Signature of individual signing on behalf of the debtor

**Anita Kremer-Frankovich**

Printed name

Position or relationship to debtor **President****Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?**

- ☒ No  
☐ Yes

**United States Bankruptcy Court  
Western District of Michigan**

In re Residential Marketing Concepts, Inc.

Debtor(s)

Case No.

Chapter

11

**LIST OF EQUITY SECURITY HOLDERS**

Following is the list of the Debtor's equity security holders which is prepared in accordance with rule 1007(a)(3) for filing in this Chapter 11 Case

Name and last known address or place of business of holder	Security Class	Number of Securities	Kind of Interest
Anita Kremer-Frankovich 1000 Woodkirk Lane Matthews, NC 28104	Common	1000 shares	Shareholder
Harvey Goldsmith 48 Westbridge Road Westhampton Beach, NY 11978	Common	539 shares	Shareholder

**DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP**

I, the **President** of the corporation named as the debtor in this case, declare under penalty of perjury that I have read the foregoing List of Equity Security Holders and that it is true and correct to the best of my information and belief.

Date October 16, 2020Signature /s/ Anita Kremer-Frankovich  
Anita Kremer-Frankovich

*Penalty for making a false statement of concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both.  
18 U.S.C. §§ 152 and 3571.*

**United States Bankruptcy Court  
Western District of Michigan**

In re **Residential Marketing Concepts, Inc.**

Debtor(s)

Case No.

Chapter

**11**

**VERIFICATION OF CREDITOR MATRIX**

I, the President of the corporation named as the debtor in this case, hereby verify that the attached list of creditors is true and correct to the best of my knowledge.

Date: **October 16, 2020**

**/s/ Anita Kremer-Frankovich**

**Anita Kremer-Frankovich/President**

Signer/Title

ADOBE  
345 PARK AVENUE  
SAN JOSE CA 95110

AFLAC  
1932 WYNNNTON ROAD  
COLUMBUS GA 31993

AMERICAN EXPRESS  
200 VERSEY STREET  
NEW YORK NY 10285

ANITA KREMER-FRANKOVICH  
1000 WOODKIRK LANE  
MATTHEWS NC 28104-8053

APPRIVER  
1101 GULF BREEZE PARKWAY  
SUITE 200  
GULF BREEZE FL 32561-4858

AUTO OWNERS  
6101 ANACAPRI BLVD.  
LANSING MI 48917

BANK OF AMERICA  
2600 W BIG BEAVER ROAD  
TROY MI 48084

BANK OF AMERICA, N.A.  
P.O. BOX 45144  
FL9-100-04-24  
BUILDING 100 4TH FLOOR  
JACKSONVILLE FL 32232-9923

BLUE CROSS BLUE SHIELD OF MICHIGAN  
PO BOX 553174  
DETROIT MI 48255-3174

COLONIAL FUNDING NETWORK  
520 SILICON DR., STE 110  
SOUTHLAKE TX 76092

COLONIAL FUNDING NETWORK  
2500 WILSON BOULEVARD  
ARLINGTON VA 22201

COLONIAL FUNDING NETWORK, INC.  
C/O THE NGUYEN LAW FIRM, PLC  
100 ARBOR OAK DRIVE, SUITE 206  
PO BOX 1958  
ASHLAND VA 23005

DROPBOX  
185 BERRY  
4TH FLOOR  
SAN FRANCISCO CA 94107

EFTPS  
P.O. BOX 802501  
CINCINNATI OH 45280

S. CODY ENGLE  
1206 MORNINGSIDE DR.  
LAGUNA BEACH CA 92651

MICHAEL FLEMING  
PLUNKETT COONEY  
38505 WOODWARD AVE.  
SUITE 100  
BLOOMFIELD HILLS MI 48304

FREEPORT PRESS, INC.  
2127 REISER AVE., S.E.  
NEW PHILADELPHIA OH 44663

HARVEY GOLDSMITH  
48 WESTBRIDGE ROAD  
WESTHAMPTON BEACH NY 11978

GOOGLE INC.  
1600 AMPHITHEATRE PKWY.  
MOUNTAIN VIEW CA 94043

HUMANA HEALTHCARE INS. CO.  
500 WEST MAIN ST.  
LOUISVILLE KY 40202



IN FULLCONTROL  
14400 COLLEGE BLVD.  
SUITE 103  
LENEXA KS 66215

INTERNAL REVENUE SERVICE  
CENTRALIZED INSOLVENCY OPERATIONS  
PO BOX 7346  
PHILADELPHIA PA 19101-7346

INTERNAL REVENUE SERVICE  
10715 DAVID TAYLOR DRIVE  
CHARLOTTE NC 28262

INVISION FUNDING, LLC  
QUALIFIED MERCHANT GROUP  
2500 WILSON BOULEVARD  
ARLINGTON VA 22201

KAPITUS  
120 W. 45TH STREET  
NEW YORK NY 10036

KAPITUS LLC  
2500 WILSON BOULEVARD  
SUITE 3500  
ARLINGTON VA 22201

KAPITUS SERVICING, INC.  
2500 WILSON BOULEVARD  
SUITE 350  
ARLINGTON VA 22201

KAPITUS SERVICING, INC.  
C. DANIEL ~WATERS, ESQ.  
THE NGUYEN LAW FIRM PLC  
2201 LIBBIE AVE.  
RICHMOND VA 23230

KAPITUS SERVICING, INC.  
ATTN: TAPEKA MORGAN  
2500 WILSON BOULEVARD  
SUITE 350  
ARLINGTON VA 22201

KEY STAR CAPITAL  
4100 GREENBRIAR SUITE 120  
STAFFORD TX 77477

KEY STAR CAPITAL FUND II, L.P.  
P.O. BOX 1068  
STAFFORD TX 77497-1068

LEASEHAWK  
P.O. BOX 29425  
PHOENIX AZ 85038

LIFE STORAGE  
6467 MAIN STREET  
ROSEVILLE CA 95661

MAILCHIMP  
675 PONCE DE LEON AVE, NE  
SUITE 5000  
ATLANTA GA 30308

NC DEPARTMENT OF REVENUE  
P.O. BOX 25000  
RALEIGH NC 27640

NEXTIVA  
8800 E CHAPARRAL ROAD  
SUITE 300  
SCOTTSDALE AZ 85250

PRINTWELL, INC.  
26975 NORTHLINE RD.  
TAYLOR MI 48180

SAGE SOFTWARE  
271 17TH ST, NW  
ATLANTA GA 30363

RUTH SCHWARTZ  
8392 U POINT 6 LANE  
RAPID RIVER MI 49878

SIMAX WEB DEVELOPMENT, LLC  
9146 LANIGON  
CHARLOTTE NC 28277

SIRIUS  
1221 AVENUE OF THE AMERICAS  
36TH FLOOR  
NEW YORK NY 10020

SPECTRUM BUSINESS  
P.O. BOX 3019  
MILWAUKEE WI 53201

SPRINT PCS  
PO BOX 4181  
CAROL STREAM IL 60197-4181

STAMPS.COM  
P.O. BOX 6022  
INGLEWOOD CA 90312

THE HARTFORD  
P.O. BOX 660916  
DALLAS TX 75266

TROX TECH  
7560 CHARLOTTE HWY.  
FORT MILL SC 29707

UNITED HEALTH CARE INS. CO.  
DEPT CH 10151  
PALATINE IL 60055

**United States Bankruptcy Court  
Western District of Michigan**

In re **Residential Marketing Concepts, Inc.**

Debtor(s)

Case No.

Chapter **11**

**CORPORATE OWNERSHIP STATEMENT (RULE 7007.1)**

Pursuant to Federal Rule of Bankruptcy Procedure 7007.1 and to enable the Judges to evaluate possible disqualification or recusal, the undersigned counsel for **Residential Marketing Concepts, Inc.** in the above captioned action, certifies that the following is a (are) corporation(s), other than the debtor or a governmental unit, that directly or indirectly own(s) 10% or more of any class of the corporation's(s') equity interests, or states that there are no entities to report under FRBP 7007.1:

**Anita Kremer-Frankovich**  
**1000 Woodkirk Lane**  
**Matthews, NC 28104**

**Harvey Goldsmith**  
**48 Westbridge Road**  
**Westhampton Beach, NY 11978**

☐ None [*Check if applicable*]

**October 16, 2020**

Date

**/s/ Michael D. Lieberman**

**Michael D. Lieberman P38529**

Signature of Attorney or Litigant

Counsel for **Residential Marketing Concepts, Inc.**

**Lieberman & Cohen, PLLC**

**31313 Northwestern Highway**  
**Suite 200**

**Farmington Hills, MI 48334**

**248-539-5500 Fax:248-539-5581**

**Mike@lgcpllc.com**